

DECLARATION AND POWER OF ATTORNEY

Atty. Docket No.

As a below named inventor, I hereby declare that my residence, post office address and citizenship are as stated below next to my name; I believe I am the original, first and sole inventor (if only one name is listed below) or an original first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

MULTIMEDIA INFORMATION COLLECTION CONTROL APPARATUS AND METHOD

the specification of which is attached hereto; or

was filed as United States application Serial No.

on _____ and was amended
on _____ (if applicable); or

was filed as PCT international application Number

on _____ and was amended
on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate or § 365(a) of any PCT international application(s) designating at least one country other than the United States, listed below and have also identified below, any foreign application(s) for patent or inventor's certificate, or any PCT international application(s) having a filing date before that of the application(s) of which priority is claimed:

| COUNTRY | APPLICATION NUMBER | DATE OF FILING (day, month, year) | PRIORITY CLAIMED UNDER 35 U.S.C. 119 | |
|---------|--------------------|--------------------------------------|---|-----------------------------|
| Japan | P11-268357 | 22/September/1999 | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| | | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| | | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| | | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| | | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| | | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below:

| APPLICATION NUMBER | DATE OF FILING |
|--------------------|----------------|
| | |
| | |

DECLARATION AND POWER OF ATTORNEY (Continued)

Atty. Docket No.

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s) or § 365(c) of any PCT international application(s), designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application(s) in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. § 1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

| APPLICATIONS | | STATUS (Check one) | | |
|--------------------|----------------|--------------------|---------|-----------|
| APPLICATION NUMBER | DATE OF FILING | PATENTED | PENDING | ABANDONED |
| | | | | |
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I hereby appoint the following attorneys and/or agents to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

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DECLARATION AND POWER OF ATTORNEY (Continued)

Atty. Docket No.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

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| THIRD INVENTOR'S SIGNATURE | DATE | |

Listing of Inventors Continued on attached page(s) ☐/Yes ☒/No